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BIBDATASHEET**CONFIRMATION NO. 1583**

Bib Data Sheet

SERIAL NUMBER 10/048,110	FILING DATE 01/25/2002 RULE	CLASS 600	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. 1486-ARMY
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**** CONTINUING DATA *******

This application is a 371 of PCT/US01/06016 02/13/2001 *

(*)Data provided by applicant is not consistent with PTO records.

CHL
7/29/04**** FOREIGN APPLICATIONS *******NONE CHL
7/29/04**** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	MD	6	24	7

Allowance
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TITLE

System and method for diagnosing pathologic heart conditions

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input checked="" type="checkbox"/> All Fees
RECEIVED	No. _____ for following:	<input checked="" type="checkbox"/> 1.16 Fees (Filing)
		<input checked="" type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input checked="" type="checkbox"/> 1.18 Fees (Issue)

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1.10.100 (Issue)	
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